

## MINUTES OF MEETING

<b>Title</b>	<b>Community Health Task Group (CHTG)</b>		
<b>Date</b>	February 10 <sup>th</sup> , 2016	<b>Place</b>	IRC Amman
<b>Chair Minutes &amp; co-chair</b>	Co- chair: Elsa and Caroline Minutes: Caroline		
<b>Attended</b>	Heba Ebbini, SCJ Omar Al Amr, IMC Aseel, IRD Randa, IRD Shereen, JICA Sanne, JICA Salma, JICA Samah, JHAS Mays, JCAP	Elsa Groenveld, Medair Caroline Boustany, IRC Maisa, MoH Melanie, German Red Cross Maha, IOCC Ranad, Caritas Myroslava, Handicap International Amalia Mendes	
<b>Apologies</b>	Claire and Daniel - PU-AMI		
<b>ITEM</b>	<b>POINTS</b>	<b>ACTION POINTS</b>	
<b>Welcome/updates</b>	<p><b>Welcome to all participants, as we are waiting for more participants to come a brief update from some organisations:</b></p> <p><b>JCAP</b> is working on outreach data software, so they will be able to ID # of refugees who receive FP services (CCA, GUVS)</p> <p><b>SCJ:</b> Feb was world cancer day – worked on Jordan Breast Cancer. Will cover 6-7 locations (4 locs so far, will do the rest in Feb). 200 mothers in tefileh, maan, karak, then will move to Jordan valley/Amman. About breastfeeding/ways that breastfeeding reduces risk of breast cancer</p>		
<b>3Ws</b>	<ul style="list-style-type: none"> <li>Most agencies that are present have submitted the information</li> <li>JCAP also has 120 outreach workers; looking at # Syrians/quarter = 4000. Focus is Jordanian. Didn't input because they didn't want to do a 'false positive'</li> <li>Focus of the JRP in community health is to have a better coverage in community health coverage.</li> <li>Useful because we can calculate how the rate of CHVs/Syr population (goal is 1/1000)</li> <li>In the future it is the plan to also include the number of Jordanians (Census data), so we can see coverage per total population</li> </ul>	<ul style="list-style-type: none"> <li>- Elsa contact IRD Zaatri to update 3 W</li> <li>- Hala (JCAP) will send breakdown of CHVs/governorate</li> </ul>	

<b>Newborn data</b>	<ul style="list-style-type: none"> <li>Thanks to IRC, IRD urban, Save the Children Jordan and Medair for sending the new-born data.</li> <li>Some agencies are visiting families with new-borns, but don't have the data disaggregated per nationality and gender of the new-borns. Highlighted that there is a need to have this information and also around stillbirths, maternal death to have better programming. Agencies are looking into how they can collect this data.</li> <li>UNHCR wants to know how many stillbirths we have in Jordan (part of their Gates \$). Improve registration of infant/mother deaths</li> <li>Medair just started collecting data on whether the Syrian babies are birth-registered. New-borns need to be registered within one month after birth and if not, what are the reasons. For Medair data in January, 4 children didn't have birth registration; reasons were that parents were not legally married.</li> </ul>	Elsa will send NRC report on birth registration and deaths with the minutes (is on the portal as well.) Consolidation of new-born data sheet will also be send.
<b>Survey Monkey</b>	<ul style="list-style-type: none"> <li>Survey monkey is open until Sunday (Strategy survey - Satisfaction survey)</li> </ul>	
<b>Presentation on disability-specific services for refugees and other vulnerable groups</b>	<ul style="list-style-type: none"> <li>Presentation will be shared with meeting minutes</li> <li>Presented by Myroslava, Handicap International</li> </ul>	
<b>CBOs</b>	<ul style="list-style-type: none"> <li>Will talk about CBOs next meeting (ran out of time)</li> <li>There is confusion between CBO and NGO (Jamayat). Also consider religious structures</li> <li>Maybe have a master sheet with CBOs (positive, neutral, not so much). JHAS is very willing to discuss this.</li> </ul>	<b>Would be great if partners CH will think about this topic for next meeting. Sharing of experience with CBOs or other community structures is welcome, but voluntary so we can learn from each other</b>
<b>AOB</b>	<ul style="list-style-type: none"> <li>IMC: Azraq – some new arrivals have TB and Leishmaniasis, which has been reported to MoH. IMC doing screening (not clinical) from volunteers on symptoms of TB, and they also check the families. IOM deals w TB (diagnosis + treatment) Leishmaniasis = 12 people in last two weeks. Treatment is given at clinic.</li> </ul>	
	Next meeting planned Wednesday 9 <sup>th</sup> March 2016	

## Community Health Task Group Contact List – Updated 10<sup>th</sup> February 2016

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